

# WATER WELL REPORT

STATE OF WASHINGTON

Application No. 61-21008

Permit No. 61-21008-P

32/02-270

(1) OWNER: Name Vista Water Co. Inc. Address 435 N. Sunset Dr. Camano Is. 98292

(2) LOCATION OF WELL: County Island - SW  $\frac{1}{4}$  SE  $\frac{1}{4}$  Sec 27 T. 32 N. R. 2 E W.M.  
Bearing and distance from section or subdivision corner (1510' W & 700' N OF SE COR - SEC. 27)

(3) PROPOSED USE: Domestic ☒ Industrial ☐ Municipal ☐  
Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK: Owner's number of well (if more than one) \_\_\_\_\_  
New well ☒ Method: Dug ☒ Bored ☐  
Deepened ☐ Cable ☐ Driven ☐  
Reconditioned ☐ Rotary ☐ Jetted ☐

(5) DIMENSIONS: Diameter of well 6 inches.  
Drilled 234 ft. Depth of completed well \_\_\_\_\_ ft.

(6) CONSTRUCTION DETAILS:  
Casing installed: 6 " Diam. from 0 ft. to 229 ft.  
Threaded ☐ " Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Welded ☒ " Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Perforations: Yes ☐ No ☒  
Type of perforator used \_\_\_\_\_  
SIZE of perforations \_\_\_\_\_ in. by \_\_\_\_\_ in.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Screens: Yes ☒ No ☐  
Manufacturer's Name Johnson  
Type S. Steel Model No 304  
Diam. 4 Slot size 20 from 229 ft. to 234 ft.  
Diam. \_\_\_\_\_ Slot size \_\_\_\_\_ from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Gravel packed: Yes ☐ No ☐ Size of gravel: \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Surface seal: Yes ☒ No ☐ To what depth? 20 ft.  
Material used in seal benzene - mud  
Did any strata contain unusable water? Yes ☐ No ☒  
Type of water? \_\_\_\_\_ Depth of strata \_\_\_\_\_  
Method of sealing strata off \_\_\_\_\_

(7) PUMP: Manufacturer's Name Sco R. Lee  
Type Sud HP 1

(8) WATER LEVELS: Land-surface elevation 170 ft.  
above mean sea level.  
Static level 167 ft. below top of well Date 12/12/66  
Artesian pressure \_\_\_\_\_ lbs. per square inch Date \_\_\_\_\_  
Artesian water is controlled by \_\_\_\_\_ (Cap, valve, etc.)

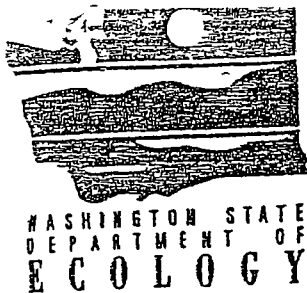
(9) WELL TESTS: Drawdown is amount water level is lowered below static level  
Was a pump test made? Yes ☐ No ☒ If yes, by whom? \_\_\_\_\_  
Yield: gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.  
" " " " " "  
" " " " " "  
Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)  
Time Water Level Time Water Level Time Water Level  
Date of test 12/19/77  
Ballor test 20 gal./min. with 5 ft. drawdown after 2 hrs.  
Artesian flow \_\_\_\_\_ g.p.m. Date \_\_\_\_\_  
Temperature of water 50 Was a chemical analysis made? Yes ☐ No ☒

(10) WELL LOG:  
Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
gravel	0	45
hard pan	45	55
yellow clay	57	75
blue clay	75	125
yellow clay	125	134
Silty blue clay	134	178
blue clay	178	207
Coarse sand & water	207	210
Cemented gravel	210	220
Clayey fine sand	220	228
Coarse sand	228	234

Work started Dec 10, 1966 Completed 12/19 1966

WELL DRILLER'S STATEMENT:  
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.  
NAME Kountzel Well Drilling (Person, firm, or corporation) (Type or print)  
Address 797 N. Smith Rd. Camano Is. Wn. 98292  
[Signed] A. H. Kountzel (Well Driller)  
License No. 0247 Date 10/17, 1977



# Well Tagging Form

15661

501



Unique Well Tag No: AKY 743

## RECORD VERIFICATION (check one)

- ☒ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available

## WELL OWNERSHIP IF DIFFERENT FROM WELL REPORT

First Name Vista Camano Water Association Last Name Association

Street Address C/35 N Smeeth Drive

City Camano Island State WA 98282

## LOCATION OF WELL IF DIFFERENT FROM WELL REPORT

Well Address Parcel 7445-00-00007-0

City Camano Island County Island

T 32 N R 2 E WM Sec 27 SW 1/4 of the SE

## FOR AGENCY USE ONLY

Latitude \_\_\_\_\_

Longitude \_\_\_\_\_

Elevation at land surface \_\_\_\_\_ feet/meters (circle one)

Additional information, if available:

- ☐ Location marked on topographic map (please attach)
- ☐ Location marked on air photo (please attach)

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated

- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other \_\_\_\_\_

State Health

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Description of well (size or casing type or well housing etc.)

6" casing

or Well Identification Tag

Strapped to well casing

Supplemental tag needed for ease of identifying well?

☐

Yes

☐

No

Where was tag placed?

C	B	A
F	G	H
L	K	J
P	Q	R

Scale 1:24,000 (1"=2,000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION

27

PTS

DIRECT ECOLOGY WATER RESOURCES PROGRAM ONLY

Date Issued

Application

Permit

Certificate

Claim

Exempt